

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000002578

**FILED**  
**Jan 06, 2010**  
**Secretary of State**

**Entity Name:** TAVERNIER CAPITAL SERVICES, LLC

**Current Principal Place of Business:**

5201 BLUE LAGOON DRIVE  
SUITE 570  
MIAMI, FL 33126

**New Principal Place of Business:**

**Current Mailing Address:**

5201 BLUE LAGOON DRIVE  
SUITE 570  
MIAMI, FL 33126

**New Mailing Address:**

**FEI Number:** 56-2312671

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COLLINS, JOHN P  
4390 SAINT ANDREWS DR.  
BOYNTON BEACH, FL 33436 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** COLLINS, JOHN  
**Address:** 4390 SAINT ANDREWS DRIVE  
**City-St-Zip:** BOYNTON BEACH, FL 33436

**Title:** MGR  
**Name:** HARTY, LELAND  
**Address:** 101 E. KENNEDY BLVD., SUITE 1430  
**City-St-Zip:** TAMPA, FL 33602

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** LELAND HARTY

M

01/06/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date